Posting of doctors in rural areas of Madhya Pradesh

2702. SHRI SHIVPRASAD CHANPURIA; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that doctors have not been posted in the Government hospitals, situated in the rural areas of Madhya Pradesh, if so, what is the district-wise number of such hospitals;

(b) what are the reasons for not posting the doctors 'here; and

(c) by when these vacancies of doctors would be filled up?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) to (c) Yes, Sir. There is shortage of doctors in Madhya Pradesh. The State Government is making adhoc recruitments.

Cancer cases in India

2703. DR. NARREDDY THULASI REDDY:
SHRI P. UPENDRA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) whether it is a fact that the incidence of cancer especially cervical breast and oral cancer is increasing in the country;

(b) whether it is also a fact that there are eight lakhs new cancer patients every year; if so, the details thereof; and

(c) what are the measures proposed to be taken to combat this?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) According to Indian Council of Medical Research, the incidence of cancer has not shown any appreciable change.

(b) It is estimated that in India about 6 lakh new cancer cases occur every year.

(c) More emphasis is now being given on prevention and early detection of cancer under the National Cancer Control Programme. Simultaneously efforts have been made to augment cancet treatment facilities m the country. A number of new schemes have accordingly been initiated under the programme.

Research and test of herbal contraceptives

2704. SHRI MURLIDHAR CHANDRAKANT BHANDARE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that researchers at the National Institute of Immunology, New Delhi, have been (testing at least three harbal contraceptives;

(b) if so, the details thereof and what are the results of the tests and studies in respec; of the effectiveness efficacy and safety of users from any side effects; and

(c) what steps have been and are being taken for commercial manufacture and use of contraceptive herbal drugs?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHAN, KARANAND): (a) The researcher$_s$ at National Institute of Immunology are testing two herbal contraceptives.

(b) The two different contraceptives developed at the National Institute of Immunology are: (i) A poly-herbal Praneem Cream, intended for intravaginal. use. In animals, it has show high contraceptives efficacy, (ii) Another preparation is Praneem VILCI, which is like a liquid Intra-uterine device (IUD). A single administration in the uterus prevents pregnancy for several months without any side effects.

Preliminary trials in women for both of these preparations are going on.

(c) The commercial manufacture will be taken up after successful completion of the trials.

Prevention of heart disease among the urbanites

2705. SHRI H. HANUMANTHAPPA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) Whether Government's attention has been drawn to the news appeared in the 'Indian Express' recently that urbanites are much more prone to heart disease as compared to slum dwellers according to a study by ICMR;

(b) if so, the steps taken by Government to educate he masses for the prevention of heart disease among the! urbanites; and

(c) the total number of people affected by heart attack in the metropolian cities during the last six months beginning from July, 1992 to 31st December, 1992?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND); (a) Yes, Sir. However, the ICMR does not have any such information.

(b) Prevention of heart diseases is part of the health education programme of the Government.

(c) Information is not available.

गुजरात में प्राथमिक स्वास्थ्य केन्द्रों और स्वास्थ्य एककों में डाक्टरों की कमी

2706. **श्री गोपाल सिंह जी० सोलंकी :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार को इस बात की जानकारी है कि गुजरात में प्राथमिक स्वास्थ्य केन्द्रों और स्वास्थ्य एककों में डाक्टरों की अत्यन्त कमी है;

(ख) क्या यह सच है कि केन्द्रीय सरकार स्वास्थ्य योजना के अनेक डाक्टर, विशेषतौर पर स्थानीय डाक्टर राज्य के अंदरूनी क्षेत्रों के गांवों में काम करने के इच्छुक नहीं हैं ; और

(ग) क्या सरकार इस संबंध में कोई उपचारी उपाय करने का विचार रखती है; यदि हां, तो इसका ब्यौरा क्या है?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी० शंकरानन्द) : (क) प्राथमिक स्वास्थ्य केन्द्रों में डाक्टरों की कुछ कमी है ।

(ख) गुजरात में केन्द्रीय सरकार स्वास्थ्य योजना केवल अहमदाबाद शहर तक ही सीमित है और यह ग्रामीण क्षेत्रों में नहीं हैं ।

(ग) पुनरीक्षा करने के बाद राज्य सरकार ने नये चिकित्सा स्नातकों को 2 वर्ष के लिये ग्रामीण क्षेत्रों में तैनात करने के लिये कदम उठाये हैं । ग्रामीण क्षेत्रों में प्राइवेट चिकित्सकों को भी ग्रामीण क्षेत्रों में अनुबंध के आधार पर नियुक्त किया है और सेवा निवृत्त चिकित्सा अधिकारियों को कुछ शर्तों पर सरकारी सेवा में पुन: नियुक्त किया जा रहा है । डाक्टरों को आवधिक विज्ञापनों के जरिये तदर्थ आधार पर नियुक्त करने के प्रयास भी किये जाते हैं ।

ग्रामीण क्षेत्रों में चिकित्सा पद्धति में सुधार

2707. **चौधरी हरमोहन सिंह :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या देश के ग्रामीण क्षेत्रों में चिकित्सा पद्धति शहरी क्षेत्र की तुलना में बदतर है ;

(ख) यदि हां, तो इसका ब्यौरा क्या है ; और